

RECEIVED
CENTRAL FAX CENTER

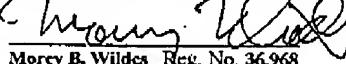
JUL 20 2007

COVER PAGE LISTING DOCUMENTS BEING TRANSMITTED VIA FACSIMILE

17 Pages Via Facsimile: 571-273-8300
 Commissioner for Patents
 P. O. Box 1450
 Alexandria, VA 22313-1450

Certificate of Transmission

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office (fax no. 571-273-8300) on July 20, 2007.


 Morey B. Wildes Reg. No. 36,968

Regarding the following Application:

Applicant(S): Ehud ARBIT et al. Examiner: BRADLEY, Christina

Serial No./ 10/500,822 Group Art Unit: 1654
 Patent No.:

Filed/Issued Date: July 7, 2004 Attorney Docket No.: P-9858-US1

Title: ORAL INSULIN THERAPY

Please find:

1. <input type="checkbox"/> Provisional Cover Sheet	9. <input type="checkbox"/> Response to Notice to File Missing Parts
2. <input type="checkbox"/> Utility Patent Application Transmittal	10. <input type="checkbox"/> Response to Notice of Incomplete Reply
3. <input type="checkbox"/> RCE Transmittal Sheet	11. <input type="checkbox"/> Request for Correction of Filing Receipt
4. <input type="checkbox"/> Fee Transmittal Sheet	12. <input type="checkbox"/> Information Disclosure Statement including: - Form PTO/SB/08 and references _____
5. <input type="checkbox"/> Patent Application Under 35 USC 111(a)	13. <input type="checkbox"/> Preliminary Amendment
<input type="checkbox"/> Provisional Patent Application Under 35 USC 111(b)	14. <input checked="" type="checkbox"/> Response to Office Action dated <u>June 20, 2007</u>
<input type="checkbox"/> Transmittal Sheet for Entering National Phase Containing: ____ Pages of Specification ____ Pages of Claims ____ Page of Abstract ____ Pages of Formal Drawings ____ Pages of _____	
6. <input type="checkbox"/> Signed Declaration & Power of Attorney	15. <input type="checkbox"/> Petition for a One Month(s) Extension of Time
7. <input type="checkbox"/> Request for Correction of Recordation of Assign. and: - Recordation Cover Sheet - Copy of Notice of Recordation of Assign.	16. <input type="checkbox"/> Notice of Appeal <input type="checkbox"/> Appeal Brief _____
8. <input type="checkbox"/> Recordation of Assign. Cover Sheet & Signed Assign.	17. <input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Publication Fee
	18. <input type="checkbox"/> Submission of Formal Drawings: Two sets of ____ Sheets containing Figs. _____
	19. <input type="checkbox"/> Copy of Priority Doc.
	20. <input type="checkbox"/> Claim for Convention Priority
	21. <input type="checkbox"/> Revocation and Power of Attorney, including: - Statement Under 37 CFR 3.73(b) - Copy of Assignment
	22. <input type="checkbox"/> Other: _____

Attorney Docket No.: P-9858-US1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICERECEIVED
CENTRAL FAX CENTER

Applicant(s): ARBIT Ehud et al. Examiner: BRADLEY, Christina

JUL 20 2007

Serial No.: 10/500,822 Group Art Unit: 1654

Filed: March 14, 2005 Confirmation No.: 8526

Title: ORAL INSULIN THERAPY

Mail Stop Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO RESTRICTION REQUIREMENT

Sir:

This Amendment is filed in response to the Restriction Requirement dated June 20, 2007 issued by the United States Patent and Trademark Office in connection with the above-identified Application. A response to the June 20, 2007 Office Action is due July 20, 2007. Accordingly, this Response is being timely filed.

Amendment to the Claims, which is reflected in the Listing of Claims, begins on page 2 of this paper.

Remarks / Arguments begin on page 14 of this paper.